

201 South Grand Avenue East
Springfield, Illinois 62763-0002

Telephone: 1-877-782-5565
TTY: (800) 526-5812

INFORMATIONAL NOTICE

DATE: February 24, 2006

TO: Participating Community Mental Health Providers

RE: Rate Increases

The purpose of this notice is to inform community mental health (CMH) providers of reimbursement rate changes. Effective with dates of service on or after January 1, 2006, the reimbursement rates for the following services will be increased:

- Services for which the minimum staff qualification is a licensed practitioner of the healing arts (LPHA) (excluding physicians and licensed nurses).
- Services for which the minimum staff qualification is a registered nurse (RN) or a licensed practical nurse (LPN).
- Services for which the minimum staff qualification is a mental health professional (MHP), except for *Crisis intervention—Pre-hospitalization screening* (HCPCS code T1023).
- Services provided off-site.

The rate increases will apply to services billed to all payers of Medicaid community mental health services, including, but not limited to, Healthcare and Family Services (HFS), the Department of Children and Family Services, and local mental health authorities that have agreements with HFS to pay for such services, as well as services billed to the Department of Human Services. The applicable coding and rate changes contained in this notice are identified in the revised Community Mental Health Services Service Definition and Activity Crosswalk, on the Department of Human Services' Web site at <http://www.dhs.state.il.us/revisedRule132/> and in the SASS Program Service Definition and Activity Crosswalk and the Children's Mental Health Procedure Codes Listing, located on the HFS Web site at:

<http://www.hfs.illinois.gov/cmh/132crosswalk.html>

Electronic claim submission via the Internet is available by registering on the department's Medical Electronic Data Interchange, Internet Electronic Claims (MEDI/IEC) System: <http://www.myhfs.illinois.gov/>. The MEDI/IEC System is available to enrolled providers and their authorized staff, claim submitting agents and payees. During the registration process, you will be given access to specific claim formats based upon your enrollment status with the department.

If you have any questions regarding this notice, please contact the Bureau of Comprehensive Health Services toll-free at 1-877-782-5565.



Anne Marie Murphy, Ph.D.
Administrator
Division of Medical Programs